## 9030104095

FORM 1

## STATEMENT OF **ORGANIZATION**

RECEIVED FEC MAIL CENTER 2009 JUN 25 A 10: 28

	•			Office Use Only	
NAME OF COMMITTEE (in full)	(Check if nai is changed)	me Example:If typing, type over the lines.	12FE4M5		
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		CITY	STATE	ZIP CODE	
COMMITTEE'S E-MAIL A	DDRESS (Please provide only	y one e-mail address)			
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COMMITTEE'S WEB PAG	iE ADDRESS (URL)				
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2. DATE 06	2212009				
3. FEC IDENTIFICATION	ON NUMBER	C			
4. IS THIS STATEMEN	T NEW (N)	OR AMENDED (A	·)		
I certify that I have exami	ined this Statement and to the	he best of my knowledge and beli	ef it is true, correct	and complete.	
Type or Print Name of Tre	easurer SARAH	M. RAYBON			<del></del>
Signature of Treasurer	Soral M	· Raybon	Date 0 (	6 22 20	09
NOTE: Submission of false,	-	mation may subject the person sign	_	•	§437g.
Office Use Only		For further informati Federal Election Comm Toll Free 800-424-953 Local 202-694-1100	mission	FEC FORM 1 (Revised 02/2009)	